

**Senate File 290 - Introduced**

SENATE FILE 290  
BY SWEENEY

**A BILL FOR**

1 An Act relating to insurance coverage for health care services  
2 related to the prevention of ovarian cancer.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. SHORT TITLE. This Act shall be known as  
2 "Barbara's Bill".

3 Sec. 2. NEW SECTION. 514C.36 Ovarian cancer prevention —  
4 coverage.

5 1. As used in this section, unless the context otherwise  
6 requires:

7 a. "*At risk for ovarian cancer*" means any of the following:

8 (1) A family history that includes any of the following:

9 (a) One or more first degree relatives that have had ovarian  
10 cancer.

11 (b) Clusters of female relatives that have had breast  
12 cancer.

13 (c) Nonpolyposis colorectal cancer.

14 (2) Testing positive for either the BRCA1 or BRCA2 mutation.

15 b. "*Cost-sharing*" means any coverage limit, copayment,  
16 coinsurance, deductible, or other out-of-pocket expense  
17 obligation imposed on a covered person by a policy, contract,  
18 or plan providing for third-party payment or prepayment of  
19 health or medical expenses.

20 c. "*Covered person*" means a policyholder, subscriber, or  
21 other person participating in a policy, contract, or plan that  
22 provides for third-party payment or prepayment of health or  
23 medical expenses.

24 d. "*Health carrier*" means the same as defined in section  
25 514J.102.

26 e. "*Surveillance testing for ovarian cancer*" means  
27 annual screening using CA 125 blood testing, a transvaginal  
28 ultrasound, and a pelvic examination.

29 2. a. Notwithstanding the uniformity of treatment  
30 requirements of section 514C.6, a health carrier that offers  
31 individual, group, or small group contracts, policies, or  
32 plans in this state that provide for third-party payment or  
33 prepayment of health or medical expenses shall offer coverage  
34 for all of the following:

35 (1) An annual cervical smear test or pap smear test.

1 (2) Surveillance testing for ovarian cancer for covered  
2 persons at risk for ovarian cancer.

3 b. Coverage required under this section shall not be less  
4 favorable than coverage a health carrier offers for general  
5 physical illness.

6 c. Cost-sharing requirements imposed for coverage  
7 required under this section shall not be less favorable than  
8 cost-sharing requirements imposed by a health carrier for  
9 general physical illness.

10 3. a. This section shall apply to the following classes  
11 of third-party payment provider contracts, policies, or plans  
12 delivered, issued for delivery, continued, or renewed in this  
13 state on or after January 1, 2024:

14 (1) Individual or group accident and sickness insurance  
15 providing coverage on an expense-incurred basis.

16 (2) An individual or group hospital or medical service  
17 contract issued pursuant to chapter 509, 514, or 514A.

18 (3) An individual or group health maintenance organization  
19 contract regulated under chapter 514B.

20 (4) An individual or group Medicare supplement policy,  
21 unless coverage under this section is preempted by federal law.

22 (5) A plan established for public employees pursuant to  
23 chapter 509A.

24 b. This section shall not apply to accident-only, specified  
25 disease, short-term hospital or medical, hospital confinement  
26 indemnity, credit, dental, vision, long-term care, basic  
27 hospital and medical-surgical expense coverage as defined  
28 by the commissioner, disability income insurance coverage,  
29 coverage issued as a supplement to liability insurance,  
30 workers' compensation or similar insurance, or automobile  
31 medical payment insurance.

32 4. The commissioner of insurance shall adopt rules pursuant  
33 to chapter 17A to administer this section.

34 EXPLANATION

35 The inclusion of this explanation does not constitute agreement with

1           the explanation's substance by the members of the general assembly.

2       This bill relates to insurance coverage for health care  
3 services related to the prevention of ovarian cancer, and shall  
4 be known as "Barbara's Bill".

5       The bill requires a policy, contract, or plan providing for  
6 third-party payment or prepayment of health or medical expenses  
7 to provide coverage for an annual cervical smear test or pap  
8 smear test, and for surveillance testing for ovarian cancer  
9 for covered persons at risk for ovarian cancer. "Surveillance  
10 testing for ovarian cancer" is defined in the bill as  
11 annual screening using CA 125 blood testing, a transvaginal  
12 ultrasound, and a pelvic examination. "At risk for ovarian  
13 cancer" is defined as a family history that includes one or  
14 more first degree relatives that have had ovarian cancer,  
15 clusters of female relatives that have had breast cancer or  
16 nonpolyposis colorectal cancer; or testing positive for either  
17 the BRCA1 or BRCA2 mutation.

18       Coverage required under the bill shall not be less favorable  
19 than coverage a health carrier offers for general physical  
20 illness. Cost-sharing requirements imposed for coverage  
21 required under the bill shall not be less favorable than  
22 cost-sharing requirements imposed by a health carrier for  
23 general physical illness.

24       The bill applies to third-party payment providers enumerated  
25 in the bill. The bill specifies the types of specialized  
26 health-related insurance which are not subject to the bill.

27       The commissioner of insurance is required to adopt rules to  
28 administer the bill.

29       The bill applies to third-party payment provider contracts,  
30 policies, or plans delivered, issued for delivery, continued,  
31 or renewed in this state on or after January 1, 2024.